

Wipe your Feet, Hang up your Ego* and Switch off your Mobile Phone

by **Kate Gray and Anne Elliot**

'Do you get paid for that?' The time's that we notice the gap between us and them is when we try to explain to strangers in a hospital corridor what Functionsuite is, why we do it and why they might feel it is relevant enough to them to get involved.

Functionsuite aims to explore ways in which artists work with the community of a hospital to produce artwork which is collaborative, co-authored or involves co-operation with at least one individual from that community. The project runs for two years in hospitals in Edinburgh and the Lothians and is funded through the Lothian Hospital Arts Consortium by the Scottish Arts Council Lottery and patients endowments with Artlink managing. Functionsuite is in its early research stages, it draws on the experiences of both the individuals and organisations involved in Artlink Hospital Arts over the last five years.

There are about 20,000 - 30,000 potential collaborators within the hospitals. This could be anyone from a patient to the domestics and porters or the medical staff. Here collaboration means bringing together the skills, enthusiasm and talent of different individuals to create ideas and artwork which all parties are happy to put their name and identity to.

So, in collaborations between artists and non-artists within healthcare environments who are 'them' and who are 'us'? Is an artist's goal to make more and more people like them; a creative and objective eye from outside? Or, do we want to be like them; more recognisably useful to society? If we define ourselves in this mutually exclusive way, are we always 'them' to each other? Do we need to hang up those identities and egos in order to make work which is constructive or interesting together?

We all have many identities. Which 'I' is writing now and which 'you' is reading it. In the same way, 'us' may not always be artists together. For example, we could meet a Doctor who has one identity as the medic in a high stress Intensive Care ward, or a more personal identity as a bee keeper, a man who likes to bake or as someone who has an interest in art and thus, presents yet another identity as the Chair on an Arts Committee for a hospital. Is there a version of him which could get on or work with one of the versions of one of us? If so, which one will it be; artist, B movie fan, hoarder? How could we use the many skills we possess together and do we then become 'us'? We also have to consider if people feel it is appropriate to bring other 'I's' to a community where they are used to being a particular role.

The projects mentioned below have grown through both research and introductions. They illustrate very different ways artists work with departments and more importantly the individuals within those departments.

Paul Rooney (artist, Top of the Pops and Liverpool FC fan) completed the project Psalm with Functionsuite in 2003. He began by walking through St John's Hospital in Livingston to see where his interests would take him. The speech and language therapy department sign caught his eye. Paul met with

Gary Withnell - a therapist in the unit who also sings in a choir in his spare time. After a conversation about music, Gary put Paul in touch with a jazz singer and ex-patient of his, Louise Holden. Paul and Louise met as individuals interested in music as much as people with experience of or an interest in a specific hospital department. Louise's relationship with the department began a few years ago when she developed problems with her voice. She found that her voice would fade out and that she did not have the will to speak anymore. At the same time she remained a confident jazz performer.

Her stage persona and her everyday persona had moved apart. She told Paul how her experiences of 'persona therapy' had allowed her to reconnect the voice of her stage persona with her everyday persona. Paul's previous work had mostly used popular song, but this research had led him to choral music where he found echoes of Louise's experience within Psalm 77, a psalm sung by an unknown disciple who describes losing his voice to cry out to God. Together, they began to

set words taken from their conversations to the tune of Psalm 77.

What eventually arose from this process was a performance of the new psalm performed by St Andrew's Camerata Choir in the main Atrium of St John's Hospital. Louise chose to take part in the performance not as a singer but as a signer for the deaf. This very personal story had been transformed into a poignant performance which was both quiet and powerfully emotional. The very strength and success of the piece and the process seemed to highlight for Louise what was lacking: How to bridge the gap between her experience and the people walking by through the everyday spaces where the piece has been performed and how to bridge the gap between the meaning she found in her experience and the medium in which it was expressed. It is her story and the hierarchies of high and low culture which the choral music evokes; the hierarchy of author, performer, translator and audience of high art and the everyday mundane space is subverted implicitly by her presence as both co-author and subject.

The challenge for us is to try to ensure that during the process of making and organising the performance Louise definitely felt she was supported and part of 'us/we'. To share her story and talents in such an open way took a lot of courage to place herself in the centre of a strange juxtaposition between sacred music, wealthy music, ordinary words and a personal, real, straightforward and yet strange story.

1 I will cry unto | God with my | voice:
Even unto God I will cry with my voice, and he shall |
hearken | unto |
me.

2 In the time of my trouble I | sought the | Lord:
I am so troubled | that I | cannot | speak.

3 I had some problems with my | talking | voice:
I couldn't maintain any strength if I had a normal
conversation, on the |
phone | or in | person.

4 My voice would get incredibly tired, it would | fade |
out:

There was a tiredness in my throat because I thought, I'm |
tired, tired |
of talk | ing.

5 I honestly don't remember a time I | did not | sing:
Another therapist pointed out that by singing you were
determined that |
people | heard your | voice.

6 She also said, It's interesting you | learnt | sign
language:
To work with the deaf, to | give | people | voice.

7 My GP said I'm going | to re | fer you:
To Speech and Language Therapy. I | was | very re | lieved.

8 The initial assessment went through all the environmental
| side of |
things:
How much coffee did I drink, what was I doing in work, |
all the | physical
| things.

Psalm is still evolving. It has been performed in a variety
of formats and in a variety of contexts from Tate Liverpool
to Training days in both the Speech and Language Therapy
and Chaplaincy. In this way it has simultaneously entered
into the Art world and the world of staff training in
hospitals.

Anne Elliot (Functionsuite team leader, hoarder, artist and
disco dancer) had worked with Harry Duffy (nightclub
singer, psychiatric rehabilitation patient and family man)
for a few years in painting workshops. Anne's approach to
collaboration is to focus on what the other person is
interested in. Painting was becoming something Harry did
because he was asked to, because he was enticed by coffee
breaks. However through the workshops Anne learnt much
about Harry's interests.

Harry had been living in the Royal Edinburgh Hospital as a
long term rehabilitation patient for many years. He liked
to work on his portraits whilst singing and drinking
coffee. Harry had an exhibition of his paintings to which
he invited his sister. By chance Anne found out from his
sister that Harry had been a nightclub singer in his time
before hospitals. This began a whole new development in

Anne and Harry's collaboration. Harry began to sing for small invited groups. It became apparent that he was both confident and respected as a singer.

Soon, they talked of recording Harry's songs.

Anne introduced Harry to Tuesday Records - a professional mobile recording studio, to work on, a CD called 'Harry Duffy Live'. The CD was burned and the hospital's gallery space used as a venue to launch the CD. An exhibition followed with the CD's displayed as you would find in a record shop, but given away. Harry's signature was enlarged and painted on the wall with his music playing out through speakers. The CD was a wild success with classics such as 'Bridge over troubled water'. Many of the hospital staff commented to both us and Harry that they had not realised he could and did sing. The CD was both a collection of cover versions and, it could be argued, a strong identity for Harry outside that of being a patient he was respected in a different way.

The process was very much organic. The work grew out of a relationship and the idea grew out of Harry's talents. It was not an idea either Harry or Anne would have developed on their own.

It is arguable how much Harry got out of the experience, the term collaboration does not have any currency for him and it cannot be said to have changed his life in a tangible way. How to evaluate Harry's experience is difficult as he expressed both positive and negative feelings about the CD at different times. He did however understand the idea of building an audience, enjoyed their appreciation of him and was responded to the and professional atmosphere of the recording studio. What does this mean in relation to whether Harry and Anne were 'us' to each other did the hospital community become 'them', a group who were targeted in order to change their perception of one of their number? Harry was both co-author and subject of a piece which presented an identity to his community. 120 copies of 'Harry Duffy Live' exist in collections of staff, patients and artists. Are we asking too much of the people who give part of their identity to a collaboration which has a life and will go on existing in many lives in many ways? It is always difficult to finish a piece of work and walk away to

allow it to exist and represent you in the world. Is it fair to ask this of others too?

One of the things which Kate Gray (ebay junkie, artist and ice skater) is interested in is what makes us who we are and how we tell stories about ourselves to make sense of our lives. At the moment Kate is having research meetings with clinical neurologist, Dr Adam Zeman. Neurology is asking some fundamental questions about identity: Does personal identity consist in some central essence, ego or soul: an observing "I" that persists over time? Or is "the self" no more than a flux of actions and experiences bundled together by the operations of the central nervous system? On this view, the mental processes underlying our sense of self - feelings, thoughts, memories - are scattered through different zones of the brain, and there is no special point of convergence. They are bound together through language and memory. The self may be fundamentally an act of imagination. In search for common ground Kate and Dr Zeman are meeting in a range of locations (hospital, pub, gallery) and producing a range of outcomes (photos, a storm in a cupboard, texts). At the moment they are trying to find the right way to work together, which versions will click. There are many possibilities to explore...

When exploring collaborations in healthcare environments we are not hanging up our egos and walking away. But, we are finding new versions of ourselves and our practices just as we are asking others to look at themselves in ways which they may not have before; patients become architects, poets are doctors and nurses are landscape gardeners. And, maybe working together on a project together we become 'we' for a little while.

Functionsuite has commissioned research projects from artists including Sarah Tripp, Anna Best and Graham Harwood (from Mongrel). This initial research facilitates a closer look at an area of the hospital community which is of interest to the artist. We hope that this will enable the artists to identify potential collaborators/partners. From this research the artists will propose projects which will be devised with input from individuals or departments which they have met during their research. Dr Justin Kenrick, a

social anthropologist is overseeing and facilitating research structures which include cross discipline research groups. The proposals will be posted on our web site in late Spring 2004. Through a process based on dialogues with different groups and consultants the proposals enter into a development phase through to 2005. Please visit our website to join the conversation:
www.functionsuite.com

* To 'hang up your ego' is a term used by Francis McKee talking about the process of collaboration, being interviewed in the Fusion Documentary on the 'My Father is the Wiseman of the village' DVD published in 2002.